PATENT APPLICATION FEE DETERMINATION RECO									√ht		,	JOCKET NUR	
CLAIMS AS FILED - PART I									_/	0/	6	16,39	7/
<u></u>	07.		(Columi			(Column 2)			SMALL ENTITY				R THAN ENTITY
TOTAL CLAIMS			,					RATE		FEE	7	RATÈ	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC'F	EE (385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 9=			OR	X\$18=	·
INDEPENDENT CLAIMS			minus 3 =					X43=		. <u>-</u>	OR	X86=	
M	JLTIPLE DEPEI	NDENT CLAIM P	RESENT						+	 ·			
• [the difference	e in column 1 is	less than zero, enter "0" in column			column 2		+145=		·	OR	+290=	
						JOIOITII1 2		TOTAL	L		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALI	EN	ITITV		OTHER	
A	Filed	CLAIMS	1	HIGH	EST BER USLY	PRESENT EXTRA	ΙΓ	RATE		ADDI- TIONAL FEE	OR]	SWALL	ENTITY
AMENDMENT,	7/8/05	REMAINING AFTER AMENDMENT		PAID FO					TI			RATE	ADDI- TIONAL FEE
	Total	. 13	Minus	- 2	0	=		X\$ 9=			OR	X\$18=	
	Independent	· 2	Minus	ر <u>ک</u> ۲۰۰۰	<u> </u>	=		X43=			OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1			. 200	·
				•			L	TOTAL	-		OR	+290= TOTAL	
//-/-05 (Column 1) (Column 2) (Column 3)							AC	DDIT. FEE			OR ,	ADDIT. FEE	
8	10/	CLAIMS		HIGHE	ST	(Column 3)	_	···	ΤΔ	DDI-	Г		<u> </u>
AMENDMENT B	124/05	REMAINING AFTER AMENDMENT	eranina.	NUMB PREVIOI PAID F	USLY	PRESENT		RATE	TIC	TIONAL FEE		RATE	ADDI- TIONAL FEE_
	Total	./3	Minus	-20	0	=/		X\$ 9=			OR ·	X\$18=	
	Independent	. 2	Minus	ر ا	3	=		X43=			才	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF		CLAIM				-	-4	OR	7002	
					• .			+145=			OR	+290=	
		AD	TOTAL DIT. FEE			OR A	TOTAL DDIT. FEE						
		(Column 1) CLAIMS	·	(Colum		(Column 3)				•		•	
ENDMENT C		REMAINING AFTER		HIGHE NUMB PREVIOU	ER USLY	PRESENT EXTRA		RATE		DDI- DNAL		RATE	ADDI- TIONAL
	Total	AMENDMENT		PAID F	OR		-		F	FEE	-		FEE
	Independent		Minus Minus	••		= ;.) 	X\$ 9=			OR	X\$18=	
AME	FIRST PRESENTATION OF MU							X43=			OR	X86=	0
								145=			OR	+290=	
•• [* If the entry in column 1 is less than the entry in column 2, write "0" in column 3 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								-		DR ,,	TOTAL	
1	The Highest Nui	mber Previously Pa ther Previously Paid	id For IN THIS	S SPACE is	less than	3, enter 13,1		oit FEE	propi		A	DDIT. FEE L ma 1,	